# TITLE 4. PROFESSIONS AND OCCUPATIONS

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#### **R4-18-601.** Definitions

In addition to the definitions in A.R.S. § 32-1501 and A.A.C. R4-18-101, the following definitions apply to this Article:

- 1. "Approved medical assistant program" means a course of study for medical assistants that is provided:
  - a. At an institution that is accredited by:
    - i. The Commission on Accreditation of Allied Health Education Programs,
    - ii. The Commission for the Accrediting Bureau of Health Education Schools, or
    - iii. An accrediting agency recognized by the United States Department of Education or the Armed Forces of the United States, or
  - b. By an organization recognized by the American Association of Naturopathic Physicians.
- 2. "Employ" means to compensate by money or other consideration for work performed.
- 3. "Medical history" means an account of an individual's past and present physical and mental health including the individual's illness, injury, or disease.
- 4. "Medication" means a drug as defined in A.R.S. § 32-1501 or a natural substance as defined in A.R.S. § 32-1581.
- 5. "Naturopathic practice" means a place where the practice of naturopathic medicine as defined in A.R.S. § 32-1501 takes place.
- 6. "Training" means classroom and clinical instruction completed by an individual as part of an approved medical assistant program.
- 7. "Treatment" means any of the acts included in the practice of naturopathic medicine as defined in A.R.S. § 32-1501.

### **R4-18-602.** Medical Assistant Qualification

An individual shall complete an approved medical assistant program to qualify for certification as a medical assistant.

## **R4-18-603.** Application for Medical Assistant Certification

An applicant for a medical assistant certificate shall submit an application packet to the Board that contains the following:

1. An application form provided by the Board, signed and dated by the applicant that contains:

- <u>a.</u> The applicant's name, mailing address, telephone number, and Social Security number;
- <u>b.</u> The applicant's date and place of birth;
- <u>c.</u> The applicant's height, weight, and eye and hair color;
- <u>d.</u> The name, address, and telephone number of the applicant's employer, if applicable;
- e. The name of the licensed physician who will supervise the applicant;
- <u>f.</u> The name and address of the institution where the applicant completed an approved medical assistant program;
- 2. A copy of a certificate of completion from an approved medical assistant program or a letter of completion from an approved medical assistant program signed by the person in charge of the approved medical assistant program;
- 3. A completed and legible fingerprint card; and
- 4. The fees required by the Board under A.R.S. § 32-1527.

#### **R4-18-604.** Renewal of Medical Assistant Certificate

An applicant for a renewal certificate shall submit to the Board:

- 1. A renewal form, provided by the Board, that is signed and dated by the applicant and contains the applicant's:
  - <u>a.</u> Name,
  - b. Social Security number,
  - c. Residence and naturopathic practice addresses, and
  - d. Telephone number; and
- <u>2.</u> The fee required by the Board under A.R.S. § 32-1527.

#### **R4-18-605.** Authorized Procedures for Medical Assistants

- A. A medical assistant may perform the following under the direct supervision of a physician:
  - 1. Obtain a patient's medical history;
  - <u>Obtain a patient's vital signs;</u>
  - Assist a physician in performing a physical examination, surgical procedure, or treatment;
  - 4. Perform a diagnostic test ordered by a physician including:
    - a. An electrocardiogram;
    - b. A peripheral vein puncture;
    - c. A capillary puncture;
    - d. Urine analysis;

- e. A hematology test; or
- f. Respiratory function testing;
- 5. Administer a medication:
  - a. By mouth; or
  - b. By subcutaneous or intra-muscular injection if the medical assistant received
     training on performing this type of administration from an approved medical
     assistant training program;
- 6. Monitor and remove an intravenous administration of a medication established by a supervising physician if the medical assistant received training on monitoring and removing an intravenous administration from an approved medical assistant training program.
- <u>7.</u> Perform physiotherapy, which includes the following:
  - a. Whirlpool treatment,
  - b. Diathermy treatment,
  - c. Electronic stimulation treatment,
  - d. Ultrasound therapy,
  - e. Massage therapy,
  - f. Traction,
  - g. Transcutaneous nerve stimulation,
  - h. Colon hydrotherapy, or
  - i. Hot and cold pack treatment.
- B. A medical assistant shall not:
  - 1. Diagnose a medical condition;
  - 2. Design or modify a treatment program;
  - 3. Prescribe a medication or natural substance;
  - 4. Provide a patient with a prognosis;
  - 5. Unless authorized by law, perform:
    - a. An ionizing radiographic procedure,
    - b. A surgical procedure,
    - c. A central venous catheterization,
    - d. An acupuncture needle insertion, or
    - e. Manipulative therapy;
  - 6. Administer or establish an intravenous medication;

- 7. Perform any procedure that requires precise placement of a needle into a patient by single or multiple injections including:
  - a. Sclerotherapy,
  - b. Prolotherapy,
  - c. Mesotherapy, or
  - d. Neurotherapy; or
- 8. Employ the medical assistant's supervising physician or have any financial interest in a naturopathic practice where the supervising physician is employed.
- C. While assisting a naturopathic physician or performing a procedure delegated to the medical assistant, the medical assistant shall wear a clearly visible tag that states the individual is a medical assistant.